

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Checksmart Financial LLC Political Action Committee

ADDRESS (number and street)

7001 Post Road

Suite 200

☐Check if different  
than previously  
reported. (ACC)

Dublin

OH

43016

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00433805

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☒

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2009

through

12

31

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Bridgette Caryn Roman

Signature of Treasurer

Electronically Filed by Bridgette Caryn Roman

Date

12

31

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name

Checksmart Financial LLC Political Action Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2009</span>		11920.97
(b) Cash on Hand at Beginning of Reporting Period .....	10209.25	
(c) Total Receipts (from Line 19) .....	37548.66	68494.66
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	47757.91	80415.63
7. Total Disbursements (from Line 31) .....	33267.01	65924.73
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	14490.90	14490.90
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

Checksmart Financial LLC Political Action Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	W	Y
0	7	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	Y	Y
1	2	0	3	1	2	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	35208.66	62667.66
(ii) Unitemized .....	2340.00	5827.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	37548.66	68494.66
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	37548.66	68494.66
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	37548.66	68494.66
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	37548.66	68494.66

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	602.03	1184.75	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	602.03	1184.75	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	32664.98	64739.98	
24. Independent Expenditure (use Schedule E) .....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs) .....	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00	
29. Other Disbursements.....	0.00	0.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share .....	0.00	0.00	
(ii) "Levin" Share .....	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	33267.01	65924.73	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	33267.01	65924.73	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	37548.66	68494.66
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	37548.66	68494.66
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	602.03	1184.75
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	602.03	1184.75

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Checksmart Financial LLC Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

William Ackerman

Mailing Address 3241 NW 18th Avenue

City

Ft. Lauderdale

State

FL

Zip Code

33309

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation

Regional Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4102

Amount of Each Receipt this Period

325.00

Bi-Monthly Payroll Deduct-  
ion - \$25/pay - \$300 for  
second half of 2009 and  
\$475 for year

**B.**

Full Name (Last, First, Middle Initial)

Lisa Barber

Mailing Address 2658 E. 16th Street

City

Tucson

State

AZ

Zip Code

85711

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial Comp-  
any L

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4104

Amount of Each Receipt this Period

260.00

Bi-Monthly Payroll Deduct-  
ion - \$20/pay - \$300 for  
year

**C.**

Full Name (Last, First, Middle Initial)

Heather Bowman

Mailing Address 19861 Parrott Blvd.

City

Marysville

State

OH

Zip Code

43040

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation

Account Services Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4106

Amount of Each Receipt this Period

325.00

Bi-Monthly Payroll Deduct-  
ion - \$25/pay - \$300 for  
second half of 2009 and  
\$675 for year

**SUBTOTAL** of Receipts This Page (optional) .....

910.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Checksmart Financial LLC Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Alison Branchfield

Mailing Address 11098 Corona Road

City

Cincinnati

State

OH

Zip Code

45240

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4108

Amount of Each Receipt this Period

130.00

Bi-Monthly Payroll Deduct-  
ion - \$10/pay - \$250 for  
year

**B.**

Full Name (Last, First, Middle Initial)

Robert Brown

Mailing Address 1110 E. Estate Road

City

Queen Creek

State

AZ

Zip Code

85240

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation  
District Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4110

Amount of Each Receipt this Period

240.00

Bi-Monthly Payroll Deduct-  
ion - \$20/pay - \$240 for  
year

**C.**

Full Name (Last, First, Middle Initial)

Timothy Bushman

Mailing Address 2014 NE 2nd Street

City

Blue Springs

State

MO

Zip Code

64014

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation  
District Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4112

Amount of Each Receipt this Period

130.00

Bi-Monthly Payroll Deduct-  
ion - \$10/pay - \$200 for  
year

**SUBTOTAL** of Receipts This Page (optional) .....

500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Checksmart Financial LLC Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Sally Castleton

Mailing Address 3603 S. 3340 West

City

West Vally City

State

UT

Zip Code

84119

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4114

Amount of Each Receipt this Period

130.00

Bi-Monthly Payroll Deduct-  
ion - \$10/pay - \$200 for  
year

**B.**

Full Name (Last, First, Middle Initial)

William Chapman

Mailing Address 848 Gummer Court

City

Reynoldsburg

State

OH

Zip Code

43068

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation  
Director of Loss Prevention

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4116

Amount of Each Receipt this Period

650.00

Bi-Monthly Payroll Deduct-  
ion - \$50/pay - \$600 for  
second half of 2009 and  
\$750 for year

**C.**

Full Name (Last, First, Middle Initial)

Eunice Cruz

Mailing Address 8030 W. Black Eagle Ct.

City

Tucson

State

AZ

Zip Code

85757

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation  
District Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4118

Amount of Each Receipt this Period

195.00

Bi-Monthly Payroll Deduct-  
ion - \$15/pay - \$210 for  
year

**SUBTOTAL** of Receipts This Page (optional) .....

975.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Checksmart Financial LLC Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Mark Dempsey

Mailing Address 116 S. Ohio Avenue

City

Columbus

State

OH

Zip Code

43205

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4120

Amount of Each Receipt this Period

130.00

Bi-Monthly Payroll Deduct-  
ion - \$10/pay - \$250 for  
year

**B.**

Full Name (Last, First, Middle Initial)

John Desimone

Mailing Address 513 W. Spur Avenue

City

Gilbert

State

AZ

Zip Code

85233

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation  
District Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4122

Amount of Each Receipt this Period

130.00

Bi-Monthly Payroll Deduct-  
ion - \$10/pay - \$200 for  
year

**C.**

Full Name (Last, First, Middle Initial)

Michael Durbin

Mailing Address 1245 Dobbins Drive

City

New Albany

State

OH

Zip Code

43054

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial

Occupation  
Interim Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.4176

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

2760.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 10 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Checksmart Financial LLC Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Greyson Eves

Mailing Address 959 Turcotte Drive

City

Gahanna

State

OH

Zip Code

43203

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation

Vice President/Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4124

Amount of Each Receipt this Period

325.00

Bi-Monthly Payroll Deduct-  
ion - \$25/pay - \$300 for  
second half of 2009 and  
\$500 for year

**B.**

Full Name (Last, First, Middle Initial)

Amanda Fox

Mailing Address 5522 Westerville Crossing Drive

City

Westerville

State

OH

Zip Code

43081

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation

Director of Training

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4126

Amount of Each Receipt this Period

650.00

Bi-Monthly Payroll Deduct-  
ion - \$50/pay - \$600 for  
second half of 2009 and  
\$750 for year

**C.**

Full Name (Last, First, Middle Initial)

Steven Fryer

Mailing Address 1571 Millville Shandon Road

City

Hamilton

State

IN

Zip Code

45013

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation

Regional Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4128

Amount of Each Receipt this Period

650.00

Bi-Monthly Payroll Deduct-  
ion - \$50/pay - \$600 for  
second half of 2009 and  
\$1,250 for year

**SUBTOTAL** of Receipts This Page (optional) .....

1625.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Checksmart Financial LLC Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Robert Grenko

Mailing Address 3402 East Laurel Lane

City

Phoenix

State

AZ

Zip Code

85028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4130

Amount of Each Receipt this Period

650.00

Bi-Monthly Payroll Deduct-  
ion - \$50/pay - \$600 for  
second half of 2009 and  
\$950 for year

**B.**

Full Name (Last, First, Middle Initial)

Robert Grieser

Mailing Address 6315 Moore Road

City

Delaware

State

OH

Zip Code

43015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation

Vice President - Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4132

Amount of Each Receipt this Period

1950.00

Bi-Monthly Payroll Deduct-  
ion - \$150/pay - \$ 1,800  
for second half of 2009  
and \$2,250 for year

**C.**

Full Name (Last, First, Middle Initial)

Suzanne Hinson

Mailing Address 15807 Willowdale Road

City

Tampa

State

FL

Zip Code

33625

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation

District Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4134

Amount of Each Receipt this Period

195.00

Bi-Monthly Payroll Deduct-  
ion - \$15/pay - \$225 for  
the year

**SUBTOTAL** of Receipts This Page (optional) .....

2795.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Checksmart Financial LLC Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Tammy Hollingsworth

Mailing Address 2583 Swings Corner Place

City

Bethel

State

OH

Zip Code

45106

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4136

Amount of Each Receipt this Period

260.00

Bi-Monthly Payroll Deduct-  
ion - \$20/pay - \$280 for  
the year

**B.**

Full Name (Last, First, Middle Initial)

Stacy Howler

Mailing Address 383 Coldwell Court

City

Gahanna

State

OH

Zip Code

43230

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation  
Regional Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4138

Amount of Each Receipt this Period

325.00

Bi-Monthly Payroll Deduct-  
ion - \$25/pay - \$ 300 for  
second half of 2009 and  
\$625 for year

**C.**

Full Name (Last, First, Middle Initial)

Brett Hymas

Mailing Address 9841 South Dove Bend Cir.

City

South Jorday

State

UT

Zip Code

84095

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4140

Amount of Each Receipt this Period

130.00

Bi-Monthly Payroll Deduct-  
ion - \$10/pay - \$200

**SUBTOTAL** of Receipts This Page (optional) .....

715.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Checksmart Financial LLC Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Jon Ipp

Mailing Address 6054 Ross Road

City

Fairfield

State

OH

Zip Code

45014

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4144

Amount of Each Receipt this Period

620.00

Bi-Monthly Payroll Deduct-  
ion - \$200/pay - \$420 for  
second half of 2009 and  
\$760

**B.**

Full Name (Last, First, Middle Initial)

Chris Jones

Mailing Address 14932 Mercury Lane

City

Huntertown

State

IN

Zip Code

46748

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation

District Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4145

Amount of Each Receipt this Period

325.00

Bi-Monthly Payroll Deduct-  
ion - \$25/pay - \$ 300 for  
second half of 2009 and  
\$500

**C.**

Full Name (Last, First, Middle Initial)

Eric Kirk

Mailing Address 3126 Oak Road

City

Walnut Creek

State

CA

Zip Code

94597

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation

Regional Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4148

Amount of Each Receipt this Period

260.00

Bi-Monthly Payroll Deduct-  
ion - \$20/pay - \$ 240 for  
second half of 2009 and  
\$500 for the year

**SUBTOTAL** of Receipts This Page (optional) .....

1205.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Checksmart Financial LLC Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Todd Kwoczka

Mailing Address 19316 Potters Bridge Road

City

Noblesville

State

IN

Zip Code

46060

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation

Regional Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4150

Amount of Each Receipt this Period

250.00

Bi-Monthly Payroll Deduct-  
ion - \$25/pay - for 10 pay  
periods or \$250 for year

**B.**

Full Name (Last, First, Middle Initial)

Terry J Lockhart

Mailing Address 145 Pecksland Road

City

Greenwich

State

CT

Zip Code

06831

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
not employed

Occupation

not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4182

Amount of Each Receipt this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

Catherine Meyers

Mailing Address 2187 Ransom Oaks Drive

City

Columbus

State

OH

Zip Code

43228

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation

Controller/Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4152

Amount of Each Receipt this Period

450.00

Bi-Monthly Payroll Deduct-  
ion - \$45/pay for 10 pay  
periods - \$450 for year

**SUBTOTAL** of Receipts This Page (optional) .....

5700.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 32

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Checksmart Financial LLC Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Rick Mulhauser

Mailing Address 16225 N. 30th Street

City

Phoenix

State

AZ

Zip Code

85032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLCOccupation  
Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	0	9

Transaction ID: SA11AI.4154

Amount of Each Receipt this Period

130.00

Bi-Monthly Payroll Deduct-  
ion - \$10/pay - \$250 for  
the year**B.**

Full Name (Last, First, Middle Initial)

Sally Mulkey

Mailing Address P.O. Box 161

City

Orient

State

OH

Zip Code

43146

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLCOccupation  
Director of Internal Collections Op's

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	0	9

Transaction ID: SA11AI.4156

Amount of Each Receipt this Period

325.00

Bi-Monthly Payroll Deduct-  
ion - \$25/pay - \$ 375 for  
the year**C.**

Full Name (Last, First, Middle Initial)

Lou Nash

Mailing Address 7065 Stillwater Cove

City

Westerville

State

OH

Zip Code

43082

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLCOccupation  
Chief Recovery Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1675.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		3	1		2	0	0	9

Transaction ID: SA11AI.4158

Amount of Each Receipt this Period

975.00

Bi-Monthly Payroll Deduct-  
ion - \$75/pay - \$ 900 for  
second half of 2009 and  
\$1675 for year

SUBTOTAL of Receipts This Page (optional) .....

1430.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Checksmart Financial LLC Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Jennifer Phillips

Mailing Address 2789 Townline Road

City

Madison

State

OH

Zip Code

44057

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation

District Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4160

Amount of Each Receipt this Period

130.00

Bi-Monthly Payroll Deduct-  
ion - \$10/pay - \$ 200 for  
year

**B.**

Full Name (Last, First, Middle Initial)

Danielle Priestley

Mailing Address 2316 Beach Haven Drive

City

Virginia Beach

State

VA

Zip Code

23451

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation

Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4162

Amount of Each Receipt this Period

260.00

Bi-Monthly Payroll Deduct-  
ion - \$20/pay - for 20 pay  
periods \$400 for year

**C.**

Full Name (Last, First, Middle Initial)

Larry Reisinger

Mailing Address 8637 Lockerbie Court

City

Dublin

State

OH

Zip Code

43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation

Regional Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4164

Amount of Each Receipt this Period

1300.00

Bi-Monthly Payroll Deduct-  
ion - \$100/pay - \$ 1,200  
for second half of 2009  
and \$1,900/year

**SUBTOTAL** of Receipts This Page (optional) .....

1690.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Checksmart Financial LLC Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Bridgette Caryn Roman

Mailing Address 8825 Dunsinane Drive

City

Dublin

State

OH

Zip Code

43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation

General Counsel/Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4166

Amount of Each Receipt this Period

3450.00

Bi-Monthly Payroll Deduct-  
ion + \$1500 year end contrib-  
ution

**B.**

Full Name (Last, First, Middle Initial)

Robert Rubesteck

Mailing Address 1605 Clarence Avenue

City

Lakewood

State

OH

Zip Code

44107

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation

Regional Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4169

Amount of Each Receipt this Period

250.00

Bi-Monthly Payroll Deduct-  
ion - \$25/pay - for 10 pay  
periods for a total of \$2-  
50/year

**C.**

Full Name (Last, First, Middle Initial)

Susie Chun Rush

Mailing Address 35 Bradford Road

City

Scarsdale

State

NY

Zip Code

10583

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
not employed

Occupation

not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 8 / 2 0 0 9

Transaction ID: SA11AI.4178

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

8700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 32

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Checksmart Financial LLC Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Enrico Torres

Mailing Address 26270 N. 69th Lane

City

Peoria

State

AZ

Zip Code

85383

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation

District Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1172.66

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4172

Amount of Each Receipt this Period

878.66

Bi-Monthly Payroll Deduct-  
ion - changed over year -  
2nd half totalled \$1065.33  
- \$1172.66/year

**B.**

Full Name (Last, First, Middle Initial)

Lisa Vittorini

Mailing Address 4248 Vista Walk Lane

City

Powell

State

OH

Zip Code

43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Checksmart Financial LLC

Occupation

Director of Compliance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 9

Transaction ID: SA11AI.4174

Amount of Each Receipt this Period

325.00

Bi-Monthly Payroll Deduct-  
ion - \$25/pay - \$375 for  
the year

**C.**

Full Name (Last, First, Middle Initial)

Stephanie Brown Wright

Mailing Address 200 Central Park South

City

New York

State

NY

Zip Code

10019

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
not employed

Occupation

not employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.4180

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional) .....

6203.66

**TOTAL** This Period (last page this line number only) .....

35208.66

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Checksmart Financial LLC Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Huntington National Bank

Mailing Address 41 South High Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement

Bank Service Fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4275

Date of Disbursement

07 / 15 / 2009

Amount of Each Disbursement this Period

101.41

B.

Full Name (Last, First, Middle Initial)

Huntington National Bank

Mailing Address 41 South High Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement

Bank Service Fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4277

Date of Disbursement

08 / 17 / 2009

Amount of Each Disbursement this Period

99.33

C.

Full Name (Last, First, Middle Initial)

Huntington National Bank

Mailing Address 41 South High Street

City Columbus State OH Zip Code 43215

Purpose of Disbursement

Bank Service Fee

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4278

Date of Disbursement

09 / 15 / 2009

Amount of Each Disbursement this Period

102.57

SUBTOTAL of Disbursements This Page (optional) .....

303.31

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 32

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Checksmart Financial LLC Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Huntington National Bank

Mailing Address 41 South High Street

City  
Columbus

State  
OH

Zip Code  
43215

Purpose of Disbursement  
Bank Service Fee

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.4279

Date of Disbursement

10 / 15 / 2009

Amount of Each Disbursement this Period

102.07

**B.**

Full Name (Last, First, Middle Initial)

Huntington National Bank

Mailing Address 41 South High Street

City  
Columbus

State  
OH

Zip Code  
43215

Purpose of Disbursement  
Bank Service Fee

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.4280

Date of Disbursement

11 / 17 / 2009

Amount of Each Disbursement this Period

127.89

**C.**

Full Name (Last, First, Middle Initial)

Huntington National Bank

Mailing Address 41 South High Street

City  
Columbus

State  
OH

Zip Code  
43215

Purpose of Disbursement  
Check Printing Fee

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.4282

Date of Disbursement

12 / 01 / 2009

Amount of Each Disbursement this Period

41.02

**SUBTOTAL** of Disbursements This Page (optional) .....

270.98

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Checksmart Financial LLC Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Huntington National Bank

Mailing Address 41 South High Street

City  
Columbus

State  
OH

Zip Code  
43215

Purpose of Disbursement  
Bank Service Fee

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.4281

Date of Disbursement

/   /

Amount of Each Disbursement this Period

27.74

SUBTOTAL of Disbursements This Page (optional) .....

27.74

TOTAL This Period (last page this line number only) .....

602.03

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Checksmart Financial LLC Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Arizona Democratic Party Legislative Account	<b>Transaction ID:</b> SB23.4252 <b>Date of Disbursement</b>
Mailing Address 2910 N. Central Avenue	<div> <div><sup>M</sup>1</div> <div><sup>M</sup>1</div> <div>/</div> <div><sup>D</sup>1</div> <div><sup>D</sup>2</div> <div>/</div> <div><sup>Y</sup>2</div> <div><sup>Y</sup>0</div> <div><sup>Y</sup>0</div> <div><sup>Y</sup>9</div> </div>
City Phoenix State AS Zip Code 85012	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement	<div>700.00</div>
Candidate Name	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) CITIZENS FOR ACTION	<b>Transaction ID:</b> SB23.4197 <b>Date of Disbursement</b>
Mailing Address PO Box 1535	<div> <div><sup>M</sup>0</div> <div><sup>M</sup>9</div> <div>/</div> <div><sup>D</sup>0</div> <div><sup>D</sup>3</div> <div>/</div> <div><sup>Y</sup>2</div> <div><sup>Y</sup>0</div> <div><sup>Y</sup>0</div> <div><sup>Y</sup>9</div> </div>
City Wilkes-Barre State PA Zip Code 18703	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement	<div>2000.00</div>
Candidate Name	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Comittee to Elect Rich Crandall	<b>Transaction ID:</b> SB23.4217 <b>Date of Disbursement</b>
Mailing Address P.O. Box 31990	<div> <div><sup>M</sup>1</div> <div><sup>M</sup>1</div> <div>/</div> <div><sup>D</sup>1</div> <div><sup>D</sup>2</div> <div>/</div> <div><sup>Y</sup>2</div> <div><sup>Y</sup>0</div> <div><sup>Y</sup>0</div> <div><sup>Y</sup>9</div> </div>
City Mesa State AZ Zip Code 85275	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement	<div>140.00</div>
Candidate Name	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

2840.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

Checksmart Financial LLC Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Committee to elect Debie Lesko

Mailing Address P.O. Box 6693

City  
Glendale

State  
AZ

Zip Code  
85312

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: AZ District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB23.4220

Date of Disbursement

/   /

Amount of Each Disbursement this Period

140.00

**B.**

Full Name (Last, First, Middle Initial)

Committee to Elect John Adams

Mailing Address 154 Lexington Drive

City  
Loveland

State  
OH

Zip Code  
45140

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB23.4190

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1100.00

**C.**

Full Name (Last, First, Middle Initial)

Committee to Elect Robert Bob Barnes

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB23.4357

Date of Disbursement

/   /

Amount of Each Disbursement this Period

400.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1640.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

Checksmart Financial LLC Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Committee to Elect Ron Gould	<b>Transaction ID:</b> SB23.4229 <b>Date of Disbursement</b>
Mailing Address P.O. Box 3145	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 2 / 2 0 0 9</div> </div>
City Lake Havasu City State AZ Zip Code 86405	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement	<div>350.00</div>
Candidate Name Ron Gould	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Elect Kirk Admas	<b>Transaction ID:</b> SB23.4201 <b>Date of Disbursement</b>
Mailing Address 1110 N. Alba Circle	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 2 / 2 0 0 9</div> </div>
City Mesa State AZ Zip Code 85213	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement	<div>400.00</div>
Candidate Name	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Elect Russell Pearce	<b>Transaction ID:</b> SB23.4240 <b>Date of Disbursement</b>
Mailing Address 1247 E. Inca Street	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 2 / 2 0 0 9</div> </div>
City Mesa State AZ Zip Code 85203	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement	<div>340.00</div>
Candidate Name	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

1090.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Checksmart Financial LLC Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Elect Thayer Vershoor	<b>Transaction ID:</b> SB23.4237 <b>Date of Disbursement</b>
Mailing Address 1326 East Encinas Avenue	<div> <div><small>M</small>1</div> <div><small>M</small>1</div> <div>/</div> <div><small>D</small>1</div> <div><small>D</small>2</div> <div>/</div> <div><small>Y</small>2</div> <div><small>Y</small>0</div> <div><small>Y</small>0</div> <div><small>Y</small>9</div> </div>
City Gilbert State AZ Zip Code 85234	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement	<div>350.00</div>
Candidate Name	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Exploratory Committee Robert Meza for State Senate	<b>Transaction ID:</b> SB23.4213 <b>Date of Disbursement</b>
Mailing Address 1833 W. Lewis Ave	<div> <div><small>M</small>1</div> <div><small>M</small>1</div> <div>/</div> <div><small>D</small>1</div> <div><small>D</small>2</div> <div>/</div> <div><small>Y</small>2</div> <div><small>Y</small>0</div> <div><small>Y</small>0</div> <div><small>Y</small>9</div> </div>
City Phoenix State AZ Zip Code 85007	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement	<div>200.00</div>
Candidate Name	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) HASTINGS FOR CONGRESS	<b>Transaction ID:</b> SB23.4192 <b>Date of Disbursement</b>
Mailing Address P.O. BOX 100277	<div> <div><small>M</small>0</div> <div><small>M</small>9</div> <div>/</div> <div><small>D</small>0</div> <div><small>D</small>2</div> <div>/</div> <div><small>Y</small>2</div> <div><small>Y</small>0</div> <div><small>Y</small>0</div> <div><small>Y</small>9</div> </div>
City FT. LAUDERDALE State FL Zip Code 33310	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement	<div>2000.00</div>
Candidate Name	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

2550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Checksmart Financial LLC Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
**HEATH SHULER FOR CONGRESS**

Mailing Address PO Box 8446

City Asheville State NC Zip Code 28814

Purpose of Disbursement

Candidate Name

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NC District: 11

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB23.4272

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**B.** Full Name (Last, First, Middle Initial)  
**HELLER FOR CONGRESS**

Mailing Address PO Box 750580

City Las Vegas State NV Zip Code 89136

Purpose of Disbursement

Candidate Name

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NV District: 02

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB23.4195

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**C.** Full Name (Last, First, Middle Initial)  
**Jack Conway for U.S. Senate**

Mailing Address 2508 DeWitt Avenue

City Alexandria State VA Zip Code 22301

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☒ Senate  
☐ President

State: KY District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB23.4254

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

Checksmart Financial LLC Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

JIM COSTA FOR CONGRESS

Mailing Address 2037 W Bullard Avenue  
# 355

City Fresno State CA Zip Code 93711

Purpose of Disbursement

Candidate Name

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CA District: 20

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB23.4257

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)

JOHN SALAZAR FOR CONGRESS

Mailing Address PO Box 534

City Pueblo State CO Zip Code 81002

Purpose of Disbursement

Candidate Name

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CO District: 03

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB23.4266

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

KOSMAS FOR CONGRESS

Mailing Address PO Box 1547

City New Smyrna Beach State FL Zip Code 32170

Purpose of Disbursement

Candidate Name

Office Sought: ☒ House  
☐ Senate  
☐ President

State: FL District: 24

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB23.4260

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Checksmart Financial LLC Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

Melvin for Senate

Mailing Address 38665 S. Sand Crest

City Tucson State AZ Zip Code 85739

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: AZ

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB23.4243

Date of Disbursement

/   /

Amount of Each Disbursement this Period

140.00

**B.**

Full Name (Last, First, Middle Initial)

MIKE ROSS FOR CONGRESS COMMITTEE

Mailing Address PO Box 360

City Prescott State AR Zip Code 71857

Purpose of Disbursement

Candidate Name

Office Sought: ☒ House  
☐ Senate  
☐ President

State: AR

District: 04

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB23.4263

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

Ohio House Republican Organization Committee

Mailing Address 4679 Winterset Drive

City Columbus State OH Zip Code 43210

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB23.4188

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2950.00

**SUBTOTAL** of Disbursements This Page (optional) .....

5090.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Checksmart Financial LLC Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Ohio Legislative Black Caucus PAC

Mailing Address 340 Est Fulton Street

City  
Columbus

State  
OH

Zip Code  
43215

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.4185

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

Repubulcan Senate Campaign Committee

Mailing Address 211 South Fifth Street

City  
Columbus

State  
OH

Zip Code  
43215

Purpose of Disbursement  
In-kind contribution for event

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.4283

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1344.98

C.

Full Name (Last, First, Middle Initial)

Republican Senate Victory Committee

Mailing Address 4183 W. Gail Drive

City  
Chandler

State  
AZ

Zip Code  
85226

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: AZ District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.4249

Date of Disbursement

/   /

Amount of Each Disbursement this Period

440.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3784.98

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Checksmart Financial LLC Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Rick Murphy Exploratory Committee

Mailing Address P.O. Box 6793

City State Zip Code  
Glendale AS 85312

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB23.4204

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 1 / 1 2 / 2 0 0 9

Amount of Each Disbursement this Period

400.00

**B.** Full Name (Last, First, Middle Initial)  
Rios for Senate 2010

Mailing Address P.O. Box 11

City State Zip Code  
Apache Junction AZ 85217

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: AZ District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB23.4246

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 1 / 1 2 / 2 0 0 9

Amount of Each Disbursement this Period

140.00

**C.** Full Name (Last, First, Middle Initial)  
SHELBY FOR U S SENATE

Mailing Address POST OFFICE BOX 1091

City State Zip Code  
TUSCALOOSA AL 35403

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☒ Senate  
☐ President

State: AL District: 00

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB23.4269

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
1 2 / 2 9 / 2 0 0 9

Amount of Each Disbursement this Period

2000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2540.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 31 / 32

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Checksmart Financial LLC Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Tibshraeny Exploratory Committee

Mailing Address 2158 Teakwood Place

City Chandler State AZ Zip Code 85249

Purpose of Disbursement

Candidate Name  
Jay Tibshraeny

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB23.4233

Date of Disbursement

/   /

Amount of Each Disbursement this Period

400.00

**B.** Full Name (Last, First, Middle Initial)  
Tom Boone 2010

Mailing Address 7288 W. Cielo Grande

City Peoria State AZ Zip Code 85383

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: AZ District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB23.4214

Date of Disbursement

/   /

Amount of Each Disbursement this Period

80.00

**C.** Full Name (Last, First, Middle Initial)  
Vote Chuck Gray

Mailing Address 7461 East Ivyglen Street

City Mesa State AZ Zip Code 85207

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: AZ District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB23.4226

Date of Disbursement

/   /

Amount of Each Disbursement this Period

400.00

**SUBTOTAL** of Disbursements This Page (optional) .....

880.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 32 / 32

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Checksmart Financial LLC Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Yost for Attorney General

Mailing Address 865 Macon Avenue

City  
Columbus

State  
OH

Zip Code  
43206

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: OH

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.4199

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

011

Category/  
Type

SUBTOTAL of Disbursements This Page (optional) .....

250.00

TOTAL This Period (last page this line number only) .....

32664.98